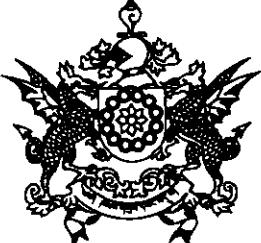


SIKKIM

GOVERNMENT **GAZETTE**

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No. 192

**GOVERNMENT OF SIKKIM
HEALTH CARE, HUMAN SERVICES & FAMILY WELFARE DEPARTMENT**

No: 61 (a) /HC, HS & FW

Dated: 07.05.2014

NOTIFICATION

1. In pursuance of the guidelines of the Ministry of Health and Family Welfare, Government of India, the State Government is hereby pleased to constitute the "District Quality Team" at District Hospitals to redress, dispose and disburse for implementation of Quality assurance programme as per procedure and time frame laid down in the manual constituting of the following members, namely:-

- | | |
|---|--------------|
| 1. Medical Superintendent | Chairperson; |
| 2. Anaesthetist | Member; |
| 3. Head of Department Obstetrics and Gynaecology. | Member; |
| 4. (Microbiologist/ Pathologist) for enforcing Infection Management Environment plan and Bio Medical Waste protocols. | Member; |
| 5. Deputy Nursing Superintendent / Assistant Nursing Superintendent | Member; |
| 6. Divisional Engineer/Assistant Engineer, Mechanical, Health Department | Member; |
| 7. Assistant Director(Sanitation) | Member; |
| 8. Store officer | Member; |
| 9. Medical Record Officer/Technician | Member; |
| 10. Ward Officer/ Master | Member. |

2. **Terms of Reference**

- (1). Staff orientation:
 - (a) Formal training shall be conducted for the staff of District Quality Team with support from the District Quality Unit.
 - (b) District Quality Team shall orient the medical, paramedical and support staff team including Group C and D to the service standards set by the state.
- (2). Ensuring adherence to quality standards:
 - (a) Through regular internal assessments, audits, reviews etc the District Quality Team members shall ensure that the standards set for a district hospital are being met.
 - (b) Corrective action plans should be initiated for identified gaps.

- (3). Regular reporting to district Quality Assurance Committee:
 - (a) The District Quality Team shall report regularly to the district Quality Assurance Committee on outcome level indicators such as sterilisation deaths, complications and failures as well as maternal and infant deaths.
 - (b) The District Quality Team shall also report to the district Quality Assurance Committee on the internal assessment findings, quality improvement measures undertaken, etc.
- (4). Ensure interdepartmental coordination:
 - (a) The District Quality Team shall liaise with various departments within the facility for effective implementation of Quality Assurance activities.
 - (b) To share the internal assessment findings of District Quality Team and external assessment findings of State Quality Assurance Unit / District Quality Assurance Unit with all the staff at the district hospital.
 - (c) District Quality Team will ensure that Departmental nodal officers will take corrective actions as per the road map
 - (d) Provided by District Quality Team.

3. Process:

- (a) Once the District Quality Team is formed, areas for an initial assessment shall be identified in the first meeting.
- (b) For achieving the standards District Quality Team will undertake the process of filling the check list, scoring the measurable indicators, summing up area wise and services wise gaps.
- (c) Assessments shall be carried out and based on its findings follow up actions to be taken.
- (d) Monitoring of the follow up actions shall be done in the subsequent meetings.
- (e) Assessments shall be followed by time bound action plans along with person responsible for each action shall be prepared.
- (f) Once the District Quality Team completes the assessment and gives service wise/ area wise scoring then will inform and invite District/State assessors for verification and guidance.

4. The Organisational Structures

- (a) This process will continue till the State Quality Assurance Committee assessors certify the attainment of the quality standards at the hospital. Then onwards District Quality Team will ensure maintaining the standards.
- (b) Facility in-charge and Hospital manager shall do daily rounds to supervise the Quality Assurance activities and sustain the motivational level of the staff.
- (c) The District Quality Team shall meet once every month.

- (d) In case of any death following a sterilisation operation, it shall be reported to the convenor of the District Quality Assurance Committee within 24(twenty four) hours. Monthly reports of maternal and infant deaths shall also be given to the district Quality Assurance Committee. In case there are no deaths, a NIL report shall mandatorily be sent. District Quality Assurance Committee is responsible for investigating a sterilisation related death and also review of maternal and infant deaths.
- (e) Terms of references for the hospital manager are given at Annexure 'D' may pursue in the operational guidelines manual.

By order and in the name of the Governor.

DR. K. BHANDARI, DM
DIRECTOR GENERAL-CUM-SECRETARY TO THE GOVERNMENT OF SIKKIM
HEALTH CARE, HUMAN SERVICES & FAMILY WELFARE DEPARTMENT

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